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*The Negative Images of Nursing Portrayed on Grey's Anatomy, House and ER and its
Effect on Public Perception and the Contemporary Nursing Shortage*

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“For most health organizations, being able to communicate effectively with the public is a top priority.”ⁱ Unfortunately, when it comes to television as a means for “product placement” of healthcare information, physicians have overshadowed the nursing profession in any attempts to convey important messages to viewers. By 2025, the U.S. can expect a shortage of at least 260,000 registered nurses, despite the temporary surge in nurse employment during the current economic recession.ⁱⁱ Furthermore, a study published in 2006 in *Health Affairs* indicates that “if hospitals increased RN staffing and hours of nursing care per patient, more than 6,700 patient deaths and four million days of care in hospitals could be avoided each year.”ⁱⁱⁱ Sadly, contemporary media does not reflect such staggering statistics. Most popular medical dramas are physician dominated shows, offering viewers little to no truth about the nursing profession. *ER*, *Grey’s Anatomy* and *House* are three well-liked medical shows with a large-scale audience spanning across the country. All three shows, however, fail to portray nurses with a positive image and essentially undermine the profession in various ways. These negative images of nurses actually contribute to the overall nursing shortage that has plagued so many hospitals across the nation; whether it be undermining, insulting, or misrepresenting the profession, contemporary media has not done a good job at being a “health educator” when it comes to nursing and the shortage we are facing.

According to the Institute of Medicine, “Nurses are the largest group of health care professionals providing direct patient care in hospitals, and the quality of care for hospital patients is strongly linked to the performance of nursing staff.”^{iv} However, popular media today reflects just the opposite. Fox’s medical drama, *House*, does an awful job representing nurses of any kind. In fact, on The Center for Nursing Advocacy’s website, nurses gave it a rating of only half a star out of a possible four. On this show, nurses are barely even background noise.

Occasionally, they walk on and off screen, dressed in scrubs and holding clipboards. In comparison to *Grey's Anatomy* and *ER*, *House* has the fewest nurse characters, as well as the fewest lines spoken by nurses. "Unfortunately, the show's key premise is itself a damaging lie: that a team composed entirely of physicians would rove the hospital providing all significant care to desperately ill patients, as the few nurses and other professionals stand silently in the background or simply disappear."^v

The invisibility of nurses on hospital dramas sends the wrong message to viewers. The public may see nurses as unnecessary, uneducated and under the rule of physicians, when in reality nurses are autonomous and essential to the success of any hospital. How media portrays nurses is essential to the profession's future; if the viewers believe nurses are superfluous to medicine, who would want to pursue a career in nursing? Portrayals of nurses on *Grey's Anatomy* are almost as horrendous as those on *House*. There are more nurse characters present on screen at any given point of an episode, however, they mainly serve as a backdrop for setting the mood of a real hospital. Most of the nurses are older and much less attractive than the main physician characters; there is certainly no comparative "McDreamy" nurse character. Nurses on *Grey's Anatomy* have random spells of spoken lines, usually only when speaking to a physician or when they are involved in a subplot, such as a nursing strike or a love affair. Overall, nurses remain relatively invisible on this hit ABC show, which "reinforces a vision of nurses as unattractive, marginally skilled subordinates."^{vi}

Out of the three shows, *ER* does the best job of representing nurses, receiving a nurses' rating of a whopping one and a half stars. On *ER*, nurses have more prominent roles, spoken lines and patient interactions. Viewers can see their presence in the operating rooms and sporadic interactions with patients. *ER* gives the most realistic illustration of nurses by allowing them

spoken lines between patients and physicians. While this illustration is not perfect, it does tell viewers that nurses actually spend time with their patients and work hand-in-hand with doctors. Despite these few positive depictions, “the show's physician-centric approach has led to a continuing failure to give viewers an accurate or complete picture of the vital role nursing actually plays in modern health care.”^{vii} The current nursing shortage is a result of factors related to recruitment and retention, including fewer workers and an aging workforce.^{viii} These three shows are not helping recruitment or retention by showing that nurses are essentially invisible in the hospital workplace.

“When television programs never show registered nurses providing any critical medical care, the public does not understand, for example, that RN staffing levels often determine whether patients live or die.”^{ix} The dominance and overpowering of physicians on medical dramas severely amplifies the invisibility of nurses, thus adding to the public’s lack of knowledge regarding the importance of the nursing profession. One egregious misrepresentation on *House*, *Grey’s Anatomy* and *ER* is showing the physicians performing critical nursing tasks, thus making them look more heroic and nurses look more incompetent and needless. The Center for Nursing Advocacy heatedly explains how physicians are shown performing tasks such as “triage, patient teaching, giving medications, providing psycho-social support, minute-to-minute care of the critically ill, and preventative care such as vaccinations.” In the real world, nurses are patient advocates and patient educators; they protect the interests of the patients as well as explain procedures and treatments. *ER* is the only show of the three that ever portrays this crucial job. For example, in the episode, “The Test,” Nurse Taggart explains to a 13-year old boy that a heart line has been put in “so we can check your blood gases without needles.” There is more nurse-patient contact on *ER* than on either of the other two shows, which more accurately

represents how it really works in hospitals. Most often in the real world, it is the nurses who spend the most time with patients, not the physicians. However, don't be fooled by this glimpse of truth on *ER*, for the show fails in many other areas and is always dominated by physicians. Yvette Freeman, who played nurse Haleh Adams on *ER* stated, "Nurses in real life do much more than what they are shown to do on 'ER.' Efforts by the Center for Nursing Advocacy aren't going to work because 'ER' is a 'doctor show.' They're the glorified characters. That's why we'll show four or five doctors in a trauma room and maybe one nurse, even though that's unrealistic."^x

"Comprehensive nursing assessments are often critical to patient survival and to physicians' own medical diagnoses."^{xi} However, on *House*, nurses do not make any assessments of patients; in fact, nurses do not even interact with patients. On the series premiere, "Everybody Lies," a patient suffers from unexplained seizures and neurological problems. Through the complex, heroic work of Dr. House and his team of physician detectives, they discover that the mysterious disease is a tapeworm infection in the patient's brain. In reality, if a nurse had done a simple, standard examination of the patient's stool, he or she could have easily detected tapeworm segments during this routine assessment. Dr. House concludes, "I solved the case, my work is done," and the audience most likely recognizes him as a genius discoverer of rare, medical mysteries. Viewers will never know that a skilled nurse could have uncovered his brilliant discovery, since this extremely physician-centric show only gives credit to doctors, despite what nurses can really do. These medical dramas give undue credit to physicians and fail to show the important jobs that nurses do. Sandy Summers refers to this misrepresentation as "physician nursing."^{xii} "If the public were to gain understanding of and appreciation for the great majority of skilled health care professionals who are not physicians, it could have positive effects

not just on these professions but on public health generally, as people would come to understand valuable alternative approaches to health care and maintenance.”^{xiii}

While *Grey's Anatomy* does not film any nurses interacting with patients, it sure does capture the glorified “secretaries” at the nurses’ station. Nurses are constantly depicted in the background of Seattle Grace Hospital working on computers and handling paperwork. Furthermore, during one of the three episodes concerning the nursing strike in season two, Dr. Shepherd asks the chief, “Who is going to fill out all of my paperwork?” This gives viewers the impression that nursing is a boring career full of administrative duties, while doctors get to be involved in all of the fun, exciting moments in the hospital. Most nurses go into the profession because of the constant interaction with people and for the reward of helping others; but, because viewers do not get to see this side of nursing, they may assume that the job is isolated and full of paperwork. In addition, the interns on *Grey's Anatomy* are filmed doing many jobs that nurses would normally do, as well as giving orders to nurses. In the very first episode, intern Meredith Grey is paged to the bedside of a patient who is suffering from grand mal seizures. Five nurses are present in the room, yet when Meredith freezes, not knowing what to do next, the only thing said by one of the nurses is, “You need to tell us what you want to do!” Shortly after, Meredith defibrillates the patient, saving her life. Not only is defibrillation usually a job that nurses do, but these nurses had no advice for the young, inexperienced intern. They all stood around, waiting for her command. In reality, it is not only the “Miranda Baileys,” or more experienced physicians, that advise interns, but nurses also give valuable, informal information and advice to the new interns. Although *Grey's Anatomy* makes no mention of it, “it is nurses who play a key role in preventing patients from dying of “July syndrome,” named for the month new interns appear in U.S. hospitals.”^{xiv}

Medical dramas have done an excellent job at making physicians look like top-notch gods, saving one life after the next. For example, Derek Shepherd, also known as “Dr. McDreamy” on ABC’s *Grey’s Anatomy*, is a glorified, sexy neurosurgeon who somehow always manages to do the impossible to save lives. In the most recent season of *Grey’s Anatomy*, on the episode, “Give Peace a Chance,” Shepherd actually removes an inoperable tumor that is wrapped around the spine of Seattle Grace’s lab tech, Isaac, despite the Chief of Surgery’s orders not to perform the surgery. Dr. Shepherd is portrayed as a brilliant surgeon who is authoritative and attractive. TV medical dramas, such as *Grey’s Anatomy*, focus most of the attention on physicians, leaving little time, if any, to discuss the important role of nurses in the healthcare system. While such shows are fictionalized accounts, they do matter because they shape the public’s views of medical professions and may also influence prospective career choices. Nurses, according to Sandy Summers, get the short end of the stick on hospital dramas. Summers argues that portrayals of nurses usually fall into four categories: “The Ministering Angel, the Physician Handmaiden, the Battleaxe, and the Naughty Nurse.”^{xv} Depictions of nurses on *ER*, *Grey’s Anatomy*, and *House* offer ample illustrations of Summers’ argument; the long term impact of such stereotypes, “reduce the value of nurses in the public eye.”^{xvi}

Secret lovers, short-lived affairs and sexual references are commonplace in contemporary media when it comes to portraying nurses. For example, Nurse Rose in Season Four of *Grey’s Anatomy* was in the spotlight so long as she was McDreamy’s lover; after he went back to intern Meredith Grey, Rose left the picture, never to be heard from again. Tellingly, Rose worked with Dr. Shepherd for thirty-six surgeries before he learned her name. Dr. Shepherd and Nurse Rose speak to each other for the first time on the eighth episode of Season Four, “Are We Still In High School or What?” Rose approaches Shepherd after a surgery they had just completed. She says to

Derek, “You have no idea who I am do you?” and he replies, “Of course I do, you’re the nurse in OR 2 who talked about the ‘clicks’ right? Later that night as Rose is leaving the hospital, Shepherd calls out her name and she responds, “You know my name?” He says, “I had to ask around but now I know. I should have recognized you from the OR today; we worked together for three hours. It’s thoughtless.” Rose tells Derek, “I’ve worked on 36 of your surgeries and today was the first time we made eye contact. Like I said, the hospital is no better than high school.” After this initial encounter, their love affair took off and, therefore, Rose garnered more airtime, not for her nursing skills but for her relationship with Derek. At one point in the episode, “Where the Wild Things Are,” Derek’s best friend, Dr. Sloan, asks Rose to set him up with the other nurses, saying he is “a good guy who is mind-blowingly good at sex,” thus objectifying nurses as sex objects. Rose disappears to pediatrics when Derek dumps her and her mission on the show is fulfilled, for she never returns again.

Similarly, in 2005 Dr. George O’Malley has a love affair with Nurse Olivia on the show. Fellow intern, Christina, tells George to sleep with the nurse to get over his feelings for Meredith. However, on the episode, “Who’s Zoomin’ Who?” the affair is cut short when George gets syphilis from Olivia, deeming her “Syph Nurse.” Nurse Olivia confesses to George that, “When we started dating, I was already kinda seeing someone.” George asks who this other guy is, only to find out that Olivia slept with Dr. Alex Korev, who gave her the syphilis. George shouts, “You and Alex!?” and then proceeds to tackle and punch Korev, screaming, “*You* gave me syphilis!” Korev gets a good hit to the face for what he did, but is never marked with a degrading label as Olivia is. Of course, only Olivia is ridiculed for “sleeping around,” thus portraying the “naughty nurse.” Even in a later episode of Season Two, “Owner of a Lonely Heart,” Izzie accuses Alex of cheating on her with that “skanky syph nurse.” These two nurses

had a great deal more lines than other nurses on *Grey's Anatomy*, all of which, however, focused on love affairs and syphilis. Should the public take these two nurses seriously? Most likely they won't, since the nursing profession was based on sex scandals and STDs. This stereotype can give the impression of a weakened authority of nurses in relation to physicians, increase the general disrespect for nurses, and undercut the importance of the profession. According to the Center for Nursing Advocacy, "health care decision makers--many of whom are sadly uninformed about what nursing really is--are less likely to devote scarce resources to a profession that has become so degraded in the public consciousness."^{xvii}

House doesn't have enough nursing characters with spoken lines to implement a serious "naughty nurse" theme throughout the series, but there is one female nurse that enters the plotline simply because she is Dr. Foreman's girlfriend. Nurse Wendy is introduced on *House* during the 2007 episode, "Insensitive." Like the nurses on *Grey's Anatomy*, Wendy only gains airtime because she is a physician's girlfriend, not because she has anything significant to offer the health care system. While many viewers are attracted to this show because of Dr. House's odd humor and sarcasm, in this episode he makes many snide remarks about nurses that most likely got the audience to chuckle. However, such comments have a far ranging effect that goes beyond just a laugh or two. At one point during the episode, Dr. House says to fellow physician Foreman, "Nurse Shorty, your biz-nitch. How long you gonna waste her time?" This gives viewers the impression that physicians are too good for nurses, and the "biz-nitch" comment is just self-explanatory. Later on during a physician-to-physician conversation, Dr. Wilson comments to House, "the new nurse from cardiology is sleeping with that weird lawyer from the board... The nurse used to be a man." Afterwards, when bored with research talk, House makes the remark that "we could be ranking nurses in order of do-ability."^{xviii} It is bad enough that

nurses are most often just “mute servants,”^{xix} but when one enters the plotline, even just for some girlfriend drama, nurses get picked on almost immediately by the divine, Dr. House.

ER, has also failed to resist incorporating the “naughty nurse” theme at one point or another during the popular NBC series. This theme found its way into the plotline of an episode titled, “All About Christmas Eve.” ICU Nurse, Jody, shows up in the ER to reignite her affair with new attending, Victor Clemente. Though she was married to a police officer, these two apparently had an affair. During this episode it becomes clear that Clemente wants nothing more to do with her. Upon entering the ER, the clerk comments that she is, “kind of a looker, in an interstate off-ramp kind of way.” It is unlikely that viewers would be able to overlook the demeaning sexual references of this remark. Dr. Clemente makes up an absurd lie to get her to leave him alone. He tells her he is with a patient suffering from a disease that he makes up, but she doesn’t believe him since she has not heard of the illness. Clemente tells her she hasn’t heard of it “because you’re an ICU nurse and this is a toxicology problem.” On top of the prostitution references here, the physician belittles the nurse’s intelligence and profession. While this scenario may be just a small underlying subplot, its message is still powerfully projected to viewers: Jody is an ignorant, naughty nurse that the physician wants nothing to do with. Does Dr. Clemente get stigmatized for sleeping with a married woman? Of course not. Cynthia Saver, RN, duly emphasizes that, “A better image isn’t a luxury, it’s a necessity.”^{xx}

Additionally, nurses are often portrayed as more caring than smart, as if they can’t be both. *ER* offers clear representative examples of this “Ministering Angel” stereotype. In the last episode ever of *ER*, while speaking amongst fellow physicians, one physician condescendingly states, “Nurses hate being called nurses.” When asked why, a nearby nurse replies, “Maybe because we have names and know a lot more than med-students, interns and most doctors.” Most

hospital dramas today fail to represent nurses as well-educated, competent caregivers. For the public, this means that nurses are inferior to the highly educated physicians; this has recently led to more women pursuing medical school instead of nursing school, thus complicating the nursing shortage. Education, wealth and prestige are critical aspects to a career today, and the media fails to illustrate those aspects regarding the nursing profession. In fact, according to a 2002 Johnson & Johnson study, “only half of Americans know that RNs must have a bachelor or an associate’s degree” and “fewer than one in five know that nurses must be licensed.”^{xxi} Yet another example in *ER* is during the 2007 episode, “The Test,” when Nurse Sam Taggart saves a teenage girl who is about to commit suicide. She is credited by a physician for “saving her life,” but what do the nurse’s sharp and decisive acts demonstrate to viewers? She may be viewed as a hero, but a hero who did not show any real healthcare skills. Viewers may not see her as a highly educated nurse, but rather they may claim that anybody could have put the pieces together to save this girl from jumping in front of a train.^{xxii} However, in reality “To achieve the RN title, an individual must graduate from a state-approved school of nursing—either a four-year university program, a two-year associate degree program, or a three-year diploma program—and pass a state RN licensing examination called the National Council Licensure Examination for Registered Nurses (NCLEX-RN).”^{xxiii} Of course, viewers are well aware of the rigorous education path of physicians, considering 20 million viewers tune in to follow Meredith Grey and her fellow interns through their medical journey. Without public awareness of rigorous nursing education programs, nurses cannot gain “legitimacy,” which Paul Starr claims is one of the two essential aspects to gaining authority.

The “physician handmaiden” role of nurses in medical dramas is the most prevalent throughout the various shows. *ER*, *Grey’s*, and *House* all represent nurses as subservient to

doctors. When portrayed at all, nurses in *House* follow any order given by Dr. House, since he and his five fellow physicians are the only ones in the hospital capable of solving the most mysterious illnesses. In the series premiere, “a nurse silently complies with the great Dr. House's request that she leave the patient's room; obviously, they have something important to discuss and nursing could not be relevant. And in the last scene, a nurse actually delivers a line, telling Dr. House that a patient is here to see him.”^{xxiv} The representation of nurses receiving, not giving orders can have a serious impact on choosing nursing as a profession. It makes the nursing profession less appealing since, nobody would want a career based on taking orders or a career that has no power to make any independent decisions. Barbara Blakeney, former president of the ANA, states that, “Until we as a nation invest in and value nursing care, the nursing shortage will continue because practicing nurses will continue to leave the workplace due to burnout or retirement, and we will fail to attract and educate sufficient numbers of new nurses.”^{xxv}

Contemporary media, like these three popular shows, actually represents physicians governing nurses, with the capability to hire and fire them. For example, in Season Ten of *ER*, during the episode “Dear Abby,” Dr. Romano fires the nurses who staged a walkout because their hours were being reduced as a cost-saving mechanism. He then hires other people who are willing to do the nurses’ work for the minimum wage. This episode incorrectly demonstrates that physicians are ultimately the nurses’ bosses and that if they choose to fire them, the nurses can be easily replaced by people working for minimum wage. Sandy Summers states in her book, “We are autonomous professionals. We report to other nurses and have our own code of ethics and our own licensing structure. We work in collaboration with physicians, not for or under them.”^{xxvi}

This notion of autonomy of the nursing profession is an issue that is very much misrepresented in the media. For example, in one *ER* episode, a physician tells nurse Taggart, “You are supposed to be covering triage right now. Nurses rotate every two hours. You’re up.” This gives viewers the impression that doctors manage and direct nurses, when, in fact, triage is overseen by nurse managers and is a nursing function in the real world.^{xxvii} Dr. House only speaks to his nurses when he is giving them some kind of order, or when the nurses report to him before even attempting to diagnose a patient on their own. Furthermore, imagine sitting in the OR observatory lounge in *Grey’s Anatomy*, watching Dr. McDreamy perform yet another life saving brain surgery. Of course his good looks may catch the eye, but the camera’s focus is only on him and the other residents directly involved in surgery. We see the OR nurses only when a physician orders one of them to go get the Chief or some other important character.

Nurses are almost always subservient or inferior to doctors on these television dramas. Where is their autonomy and power? According to Paul Starr, “the rise of the medical profession depended on the growth of its authority,” and this authority “incorporates two sources of effective control: legitimacy and dependence.”^{xxviii} Why did nurses fail to gain their authority in the same way? Medical dramas continue to uphold the authority of physicians, only making it stronger in the public eye. Unfortunately, nurses have not formed a “guild,” like physicians have done. Physicians “claim authority, not as individuals, but as members of a community that has objectively validated their competence.”^{xxix} Nurses have not evolved in the way that physicians have and thus, regrettably have not attained the power that the guild of physicians has. In some ways, this may be attributed to the role of gender since, historically physicians were male and nurses were female and men naturally dominated women. However, more and more today we see women becoming first-rate physicians who seem to have the same authority as men, yet other

women who are nurses still fail to realize such an authority. Therefore, this cannot be recognized as exclusively the effect of gender roles as it may have been in the past. Why don't hospital dramas bring out this issue and fight for the power of nurses? Instead, they undermine what authority they do have and put the physicians' influence on a pedestal.

The lack of autonomy and power given to the nursing image has most likely contributed to increased numbers of women pursuing medical school; nursing professor and historian, Ellen D. Baer calls this "The Feminist Disdain for Nursing."^{xxx} Furthermore, "Nurses-male and female-are looked upon as having made a second-class career choice."^{xxxi} Dr. Abby Lockhart on *ER* is one of these women who abandoned nursing to become a doctor. In the 2003-2004 season, Nurse Abby Lockhart decides to go back to school to become a physician for reasons that are not made particularly clear. She gives some indication of wanting to become a doctor so she can have the ability to do the more important things, like medical diagnosis, and escape the disrespect of the nursing profession. Everyone, even fellow nurses, supported her move to a "higher position" and nobody on the show ever mentioned reasons or encouragement for staying in the nursing field.^{xxxii} "The producers of *ER* believe that an upwardly mobile nurse should be reborn as someone more successful and interesting, preferably a physician."^{xxxiii} This image of nursing definitely contributes to the nursing shortage, for it encourages women to go beyond nursing and into more prestigious jobs that require a higher education, namely to become physicians. Sandy Summers, MSN, MPH, RN, states, "Negative media images of nurses have been a key factor in the nursing shortage because what people see affects what they think and do, in everything from decisions about what career to choose to how to allocate healthcare funding."^{xxxiv} *Grey's Anatomy* indirectly undermines the nursing profession by centering its

entire storyline on the education of physicians. More directly, however, the interns often make comments about getting “a real medical education,” which down plays the nursing profession.

In addition, on all three shows, female doctors are almost always young and attractive, which gives an indirect yet powerful image to female viewers. On the other hand, many of the nurses are older and less attractive. Young women deciding on career choices will more likely associate themselves with blonde bombshell Izzie Stevens over some older woman lingering in the background. In fact, according to the 2004 “National Sample Survey of Registered Nurses” released in February 2007 by the federal Division of Nursing, the average age of the RN population in March 2004 was 46.8 years of age, up from 45.2 in 2000.^{xxxv} Moreover, in March 2008, The Council on Physician and Nurse Supply called for 30,000 additional nurses to be graduated annually to meet the nation's healthcare needs.^{xxxvi} Therefore, it is imperative that young women choose nursing as a career in order to offset the number of nurses retiring over the next few years. But, for these TV shows, “Nursing is something smart, independent women have left behind. They make it appear as if nursing no longer has value now that women can become physicians.”^{xxxvii}

Medical dramas not only misrepresent and undermine the nursing profession, but these shows occasionally sanction blatant contemptuous comments about nurses. Alex Karev is the poster-child for making snide remarks about nurses and damaging the image of the profession on *Grey's Anatomy*. In the first episode, “A Hard Day's Night,” Karev diagnosed a patient with pneumonia and told the nurse to start antibiotics. The nurse asks, “Are you sure that is the right diagnosis?” Karev takes great offense at having his medical decision questioned by a nurse, thus firing back at her, “Well, I don't know, I'm only an intern. Here's an idea, why don't you go spend four years in med school and let me know if it's the right diagnosis. She's short of breath,

she's got a fever, she's post-op. Start the antibiotics." Ironically, earlier that day, the interns' attending, Dr. Bailey, tells them that they are "interns, runts, nobodies, lowest on the surgical food chain." However, Karev still feels the need act superior to and belittle the nurses at Seattle Grace. These comments make nurses look like nagging, annoying patient advocates. It is the duty of nurses to advocate for their patients, but here viewers will not see nurses as doing their job. Instead, they will see nurses as being pesky nuisances who cast doubt on the all-knowing physicians.

Later, during the same episode Alex complains to fellow intern, Meredith Grey, saying, "God, I hate nurses." Still worse, one of Karev's notorious name-calling tactics uses the word "nurse" as a way of making fun of other interns. Annoyed at one point shortly after his spat with the nurse, he indirectly calls Meredith Grey a nurse. She takes offense to this sarcastic remark and shouts back, "What did you just say? Did you just call me a nurse?" The episode is very interested in Meredith's injured feelings about being called such an insulting name, but the nurse is "just a squeaky wheel, making noise because the plot needs oil." The nurse has been eviscerated for rightfully being a patient advocate, and the show does not express any sign of being concerned.^{xxxviii} In the eyes of the fictionalized doctors on medical TV shows, being called a nurse means you are a "peripheral subordinate," who is undereducated and of lowly status. It certainly would not imply that you are a "trustworthy, capable and conscientious caregiver, critical to the health care system."^{xxxix} In comparison, doctors hold life and death in their hands in every episode and are portrayed as noble, brilliant and heroic figures that should not be challenged. As a result, this negative image of nurses will impact how seriously the public takes the profession. Whether that helps determine one's career path or how much funding to invest in

the profession, the disrespectful images of nurses do not help combat the serious nursing shortage that, as of 2001, afflicts 84% of hospitals across America.^{xi}

In an unfortunate search for twenty-one monopoly pieces swallowed by a young boy, intern Cristina Yang sifts through his stool during the 2006 *Grey's Anatomy* episode, "Where the Boys Are." This is depicted as a cruel punishment from chief resident, Bailey, and likens nursing with "disgusting, trivial work that no educated, ambitious person would ever want to do."^{xli} In a desperate attempt to get herself out of the repulsive task, Cristina asks Bailey, "Isn't this more of a nurse's job?" Bailey replies, "Are you too good to help that boy?" At first, Cristina says, "Yes," but then changes her answer to "No. Definitely not. I just thought I'd be more help if I was assisting you in a surgery." This plotline degrades a nursing job to one that anyone with an important medical contribution to make would never be caught dead doing. Cristina, an intelligent female doctor, gives viewers the idea that physicians are above these grotesque tasks that should be left for nurses to do. This gives the impression that the jobs that nurses do are substandard chores that require little to no education or intelligence. The example here most likely impacted female viewers, since Cristina was the one to put down the profession. In this case, gender cannot be blamed for the superior tone between physician and nurse. This demonstrates that we have a more serious issue on our hands, since now the disdain for the nursing profession cannot be attributed to a gender issue, but rather it is a professional issue. Physicians on these shows can be filmed doing all sorts of nursing jobs that would render respect for the nursing profession without giving any credit to nurses, but when the physicians do a nurse's task that warrants disrespect they certainly assign the credit to the nursing profession. This undoubtedly impacts viewers' opinions of nursing and distorts public perception about the what nurses really do in their line of work. "Americans love nurses, but the public still has a

narrow view about what the profession actually does. Polls show a gap in the awareness that people, especially young people, have of what nurses do.”^{xlii}

According to The Center for Nursing Advocacy, compared to *House* and *Grey's Anatomy*, *ER* has “generally depicted nurses as competent, caring professionals with technical training who contribute to patient outcomes.”^{xliii} However, the portrayals of nurses are still very much flawed. Most medical dramas have occasionally illustrated physicians’ mishaps and imperfect judgments, but since *ER* has more nursing characters than other shows it has also incorporated nurses’ incompetence and slip-ups. Nonetheless, there is a clear distinction between the way in which physicians’ errors are portrayed and the way nurses’ errors are represented. When physicians make mistakes on *ER* they are, “almost without exception, impaired by inexperience, time pressure, or some other somewhat understandable problem.”^{xliv} On the other hand, when nurses make mistakes, most often the errors are because of mere ignorance and incompetence. For example, in the episode titled, “Graduation Day,” Lockhart and Kovac’s baby is being treated in the NICU, and at one point they leave the baby with a nurse and Lockhart’s mother. When the baby’s heart monitor goes off, the grandmother is startled and grabs the nurse’s attention, only to be hushed up. The nurse tells her this beeping “happens all the time.” When it goes off a second time, followed by the heart monitor alarm that viewers are so familiar with, the nurse assures the baby’s grandmother once again by saying, “If you overreact to every little blip and bleep in this place you'll make yourself crazy.” The grandmother finally gets the attention of the physician in charge of the case, and the surgeons rush in to stabilize the baby and prepare for surgery.^{xlv} The doctor later tells Lockhart that it was a “good thing your mom was watching him like a hawk!”

This example of a nursing error shows an obvious lack of knowledge on the part of the staffed nurse. Even the grandmother knew better! Furthermore, the audience even most likely knew what the blaring heart monitor indicated. The impact here is the decrease in respect for nurses as competent caregivers. Physicians are the heroic lifesavers here, while nurses are undereducated, ill-equipped caregivers. Physician blunders are “always balanced by the overwhelming general regard the show has for physician intellect, skill, and concern for patients, regard that dominates every episode.”^{xlvi} Nurses, however, are held entirely accountable for their mistakes, with no possibility that any outside force also contributed to the mistake; the nurse was incompetent, that is all we can see. It is no surprise that physicians have such powerful autonomy, since competence is one of the two major factors contributing to professional sovereignty. Medical media just can’t resist illustrating physicians as lifesaving gods who outshine all other healthcare professionals. Moreover, a nursing mistake, like the one illustrated in this episode, could have been a great example of how such errors can occur due to short staffing of the nursing shortage. There was an opportunity to make such an example into a means for increasing awareness of a critical issue that really affects hospitals nationwide. But instead, *ER* writers decided to simply show the nurse as incompetent in order to enhance the noble image of physicians. “Studies have shown that *ER*’s apparent realism has a strong impact on how viewers see health care, and Summers argues that this lends dangerous credibility to the show’s distortions of nursing.”^{xlvii} Distortions, such as the one in this episode of *ER*, disrespect and ridicule nursing. Consequently, this will negatively impact public perception of nursing, affecting the number of people who choose to enter into the nursing field.

The Center for Nursing Advocacy has been lobbying TV producers and writers since 2001 to improve the image of nursing, with only limited success.^{xlviii} On June 8th, 2009, a new

nursing drama titled, *Nurse Jackie*, premiered on Showtime with many nurses hoping that it would mend the negative image of nursing and give the public a better understanding of the nursing profession. One glaring response to the show's debut came from The American Nurses Association, which has issued a "statement of disappointment at how the show portrays nurses and nursing in negative images that could erode the trust of patients and even discourage young people from considering a career in nursing."^{xlix} Yet, after only the first episode aired, the new show was picked up by Showtime to run a second season since *Nurse Jackie* attracted so many viewers. In fact, it was the highest-rate season premiere in Showtime history! People are definitely interested in this new drama, but the responses are very mixed; some are adamantly outraged and opposed to this show, while others find it entertaining and even educational.

On one side of the spectrum, some think, "Jackie is definitely not the 'naughty nurse' or the doctor's handmaiden that we often accuse the media of portraying. Jackie is smart, caring, respected by her peers, and a vigilant advocate for her patients."^l Some nurses have commented on blogs, noting that they wish they could speak out and have the strength and pride that Jackie demonstrates. Showtime actually screened this pilot episode to real nurses, several of which raved about it on the Showtime's website. One nurse said, "*Nurse Jackie* is well overdue for nurses." Another commented, "She portrayed a nurse as we really see how nurses are."^{li} On the show itself, Jackie's nursing student, Zoey, says to her, "You're a saint," and looks up to Jackie with admiration. From the public standpoint, they "trust and like nurses like Jackie who are so obviously there for patients, recognizing that patients are more than a set of symptoms in need of treatment,"^{lii} and thus are genuinely interested in watching the new show. This tells us that the public sees nurses as more caring than physicians and appreciates how they treat patients as human beings, which physicians are moving away from more and more today. This is a great

indication of public opinion regarding the care of nurses. However, what does this tell us about how viewers see the profession as a whole. Is it appealing to those seeking careers? Do they see nurses as professionals who are highly educated in their field? It is fantastic that public reviews reveal that patients trust nurses and value their kindness, but there is so much more to the profession that the public is still so unaware of.

However, on the other side of the spectrum, there are frustrated nurses who believe *Nurse Jackie* disregards nurses' core qualities, which include being "ethical, right minded and honest."^{liii} On the first episode alone, Jackie snorted pills that she had received from the pharmacist she had sex with in the lab room, she forged an organ donor card, flushed a patient's ear down the toilet and then stole his wallet to give to a pregnant woman. At the end of the episode, Jackie slipped her wedding band back on and went home to her husband and two daughters.^{liv} In the eyes of many viewers, she is a painkilling addict who sleeps around with men at work. Barbara Crane, president of the National Federation of Nurses, stated, "I have no clue what the screening was supposed to be about. They couldn't think that those of us in the most ethical profession-and we are the most ethical profession-that we could possibly find that entertaining."^{lv} In addition, nurses posted comments on the New York State Nurse's Association website, most of whom did not like *Nurse Jackie*. One ER nurse posted, "We all know that Jackie is a fictional character, but it's unfortunate that the greedy executives of these networks continue to create shows that portray dysfunctional nurses." In another post, however, the opposite view was expressed by a nurse who stated, "Isn't there something a little absolutist in wanting only an idealized portrayal of a nurse? Do we really believe the public won't understand that this is a drama, not a class in best practices for nurses?"^{lvi} Despite the few nurses who find the show entertaining, NYSNA Chief Executive Officer, Tina Gerardi, sent a letter to Showtime,

asking that it add in a disclaimer for each episode to remind viewers that Jackie is not representative of the nursing profession. The request was denied because Showtime declared that *Nurse Jackie* is a fictional character and the sole purpose of the show is to entertain. Regardless of what producers and the general public may believe, it has become ever more clear that “fictional television can also play a significant role in shaping public images.”^{lvii} In fact, according to a study in 2000, many young people believe nursing is just for women, that it is not a profession, and that nursing is too lowly for them.

Viewers of *Nurse Jackie* may appreciate her kindness and fierce patient advocacy, but what will her dysfunctional lifestyle say about nurses? She is a “pill-popping” adulteress who can be entirely unethical at times. Meredith Grey is the star of *Grey’s Anatomy*, but because she is a physician she can’t possibly be depicted as unethical or addicted to painkillers. Why is it so easy for nurses to be negatively portrayed as dysfunctional characters? It is very possible that nurses are an easier target because they haven’t attained the professional sovereignty that physicians have. As Paul Starr explained, physicians have such powerful autonomy because they have gained legitimacy and dependence over time. Unfortunately, nurses do not have the same autonomy and therefore have never commanded the respect they crave, despite having more training and education than ever before. As a result, they do not have the resources and support to effectively fight against the negative image that media casts out to the public. In turn, the nursing shortage continues to be a serious issue as less people choose to go into nursing and more nurses burn out or retire. The President of the ANA stated that, “These harmful images play a role in shaping the values, impressions and ultimately the career choices of young people, and may very well contribute to the nursing shortage that is reaching crisis proportions in our

nations.”^{lviii} The media has the potential to assist in reducing the shortage, but here we see yet another missed opportunity to portray nurses in the ethical, respectable way they deserve.

Television medical dramas have been used in recent years as a type of “product placement” for health information as well as a health educator for the public.^{lix} During the *Grey’s Anatomy* episode, “Break on Through,” which aired in January, 2006, angry, frustrated nurses at Seattle Grace Hospitals stood outside chanting, “Fair hours, fair wages! Fair hours, fair wages!” According to the American Hospital Association survey of 5,000 community hospitals in 2007, hospitals across the nation needed 116,000 RNs to fill immediate vacancies. Shortages are contributing to “decreased staff satisfaction, emergency department overcrowding, and decreased patient satisfaction.”^{lx} On a more serious note, The Joint Commission on Accreditation of Healthcare Organizations (JCAHO) reported in 2002 that the shortage of nurses contributes to nearly a quarter of all unexpected incidents that kill or injure hospitalized patients.^{lxi} *Grey’s Anatomy* is the only contemporary medical drama that has addressed the nursing shortage concern. Over the course of about three episodes in season two, there is an important subplot of the nursing strike as a result of being overworked and underpaid. Although clips from these episodes likely educated viewers in some aspects of the nursing shortage, the issue was never fully developed. Furthermore, overriding concerns among physicians topped this subplot, quashing some significance of the issue.

Throughout these three episodes, the frustration among the exhausted nurses becomes clear to viewers. The nursing manager tells the Chief, “We are overworked and exhausted.” Here, viewers learn that there is a shortage of nurses at Seattle Grace and therefore, the staffed nurses are forced to work a lot more. With more hospital positions vacant, those nurses employed must also see more patients. This causes more stressful work environments, and

therefore produces greater burnout rates and increased job dissatisfaction.^{lxii} Overtime and long hours are yet another unfortunate result of the nursing shortage today, hence the picket signs in *Grey's Anatomy* reading, "Overtime Kills!" and "Nurses are overworked and understaffed!" Additionally, the demand for fair wages during the Seattle Grace strike is briefly illustrated. This is a real-life issue among nurses today because their wages remain relatively flat, despite the long hours and higher patient-to-nurse ratios they experience. As a result, the profession becomes less appealing to those considering a career in nursing. In addition, in "Break on Through," as Dr. Shepherd complains about his increased workload due to the nursing strike, the Chief responds, "We need an additional 40 nurses to relieve the overtime they are striking about; that's \$2 million a year we don't have." This is the greatest extent of any sound, numerical data given about the nursing shortage at Seattle Grace. Mostly, viewers see the broad picture of cranky, overworked nurses demanding fair wages and shorter hours.

While the subplot here does portray the difficulty nurses are facing because of the shortage, the episodes fail to dig deeper into the issue. As Joseph Turow notes, "We found that health policy issues do regularly enter the plots of prime time hospital series, although most such portrayals do not probe the issues in depth."^{lxiii} Why is there a nursing shortage? How can the health care system fix it? These important questions are left out of the episodes. Moreover, the three episodes fail to make the nursing shortage a critical national issue. Viewers may get the impression that the nursing shortage is only a problem within Seattle Grace Hospital. Therefore, based on these episodes, *Grey's Anatomy* is a fairly effective health educator for this contemporary nursing issue. Unfortunately, other medical dramas have not integrated this important theme into their storylines. While *Grey's* does deserve credit for allotting airtime over the course of three episodes to this issue, the physicians still dominated the major plotlines and

the episodes failed to show more of the repercussions on the hospital and on the national level of the issue in America today. For example, greater patient-to-nurse ratios have shown to have greater mortality rates in hospitals than those that are fully staffed;^{lxiv} *Grey's Anatomy* does not touch upon such serious implications as these. Overall, medical dramas are not only failing to portray nurses in a positive, realistic way, which negatively impacts the national shortage, but such shows fall short of addressing the actual issue itself that is having such a strong affect on the American health care system.

“Ending the shortage will require efforts not only to recruit new nurses and address faculty shortages in schools of nursing but also to work with hospital administrators, nurse leaders, and nurses at the bedside to improve the work environment for nurses and with researchers to shed on the many factors related to the problem and on promising solutions.”^{lxv} Popular medical dramas can be an excellent source of so-called “edu-tainment” on these nursing issues, only if they can move away from the physician-centric plots and undermining of nurses.^{lxvi} Mending the negative image of nurses in the media can have a strong, positive effect on the nursing shortage crisis in America today. However, despite angry letters and recent suggestions for improvement, producers of medical dramas remain primarily focused on entertainment and the “McDreamys” of the fictionalized world. A positive, respectable image and an accurate portrayal of what nursing really entails is imperative for the nursing profession, for viewers may ultimately make career choices based on their perceptions of what they see on TV. Furthermore, how seriously the public and health care decision makers take nursing will determine the support and resources devoted to the profession. “If we stand together to end the entertainment industry’s use of stale stereotypes, today and tomorrow’s nursing profession may have the social, political and financial support it so richly deserves.”^{lxvii}

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